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Sharon Trent	(Depositor's name)
	(Signature)
November 2,2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/772,554	02/05/2004	James Trygve Wold	11747.2US01	5523

TITLE OF INVENTION: METHOD OF FOLDING FLAT BOTTOM BAG

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	12/30/2005
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DESAI,	HEMANT	3721		493-218000	•	
CFR 1.363). Change of correspor Address form PTO/SB/ "Fee Address" indice PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AN	ation (or "Fee Address" Indictor more recent) attached. Us D RESIDENCE DATA TO Est an assignee is identified bin 37 CFR 3.11. Completion NEE	Correspondence ation form e of a Customer BE PRINTED ON Telow, no assignee of this form is NOT	(1) the na or agents (2) the na registered 2 registered listed, no THE PATEN data will app r a substitute (1) RESIDENCE	nting on the patent front page, limes of up to 3 registered pater OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed. If (print or type) The patent of the patent of the patent of filing an assignment. The patent of the patent of the patent of the patent of the patent. The patent of the patent. The patent of the pate	a member a les of up to no name is 3 lee is identified below, the current of the	document has been filed for
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